

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 OCT 17 PM 12:18

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

R E S O U N D I N G B O O K S P A C E

ADDRESS (number and street)

1 2 1 3 N S h e r m a n A v e

Check if different  
than previously  
reported. (ACC)

# 3 5 6

M a d i s o n W I 5 3 7 0 4 -

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00541631

3. IS THIS  
REPORT

NEW  
(N)

OR

AMENDED  
(A)

4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)

☒ July 15  
Quarterly Report (Q2)

October 15  
Quarterly Report (Q3)

January 31  
Year-End Report (YE)

July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of

(d) 30-Day  
POST-Election  
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
04 01 2016

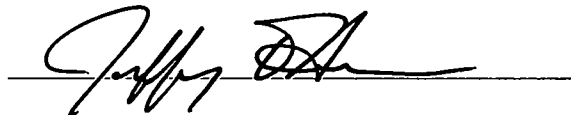
through

M M / D D / Y Y Y Y  
06 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jeffrey D. Horn

Signature of Treasurer



Date

M M / D D / Y Y Y Y  
10 14 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

20161017001000100

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Resounding Books PAC**

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2016

To: MM / DD / YYYY 06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		2,402.46
(b) Cash on Hand at Beginning of Reporting Period.....	1,666.08	
(c) Total Receipts (from Line 19) .....	68.32	803.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1,734.40	3,205.67
7. Total Disbursements (from Line 31) .....	443.70	1,914.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1,290.70	1,290.70
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	598.02	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E. Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Resounding Books**

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2016 To: MM / DD / YYYY 06 / 30 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	38.72	38.72
(ii) Unitemized.....	29.60	535.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	68.32	574.41
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	0.00	228.80
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	68.32	803.21
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	68.32	803.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	68.32	803.21

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	,	,
(ii) Non-Federal Share .....	,	,
(b) Other Federal Operating Expenditures .....	443.70	1,589.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	443.70	1,589.97
22. Transfers to Affiliated/Other Party Committees .....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0.00	325.00
24. Independent Expenditures (use Schedule E) .....	,	,
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	,	,
26. Loan Repayments Made .....	0.00	0.00
27. Loans Made .....	,	,
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	,	,
(b) Political Party Committees .....	,	,
(c) Other Political Committees (such as PACs) .....	,	,
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements .....	,	,
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	,	,
(ii) "Levin" Share .....	,	,
(b) Federal Election Activity Paid Entirely With Federal Funds .....	,	,
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	443.7	1,914.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	443.70	1,915.97

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	68.32	803.21
34. Total Contribution Refunds (from Line 28(d)) .....	.	.
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	.	.
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	443.70	1589.97
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.	.
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	443.70	1,589.97

2016-10-17 03:00:00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Resounding Books PAC**

Full Name (Last, First, Middle Initial)

**A. Amazon Digital Services**

Mailing Address

410 Terry Avenue N

City

Seattle

State

WA

Zip Code

98109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☒

Other (specify) ▼

EBook Sales

Aggregate Year-to-Date ▼

38.72

Date of Receipt

MM / DD / YYYY  
06 / 29 / 2016

Amount of Each Receipt this Period

38.72

Total of all books sales for  
distinct individuals whose  
purchases amounted to  
less than \$200 each.

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... 38.72

**TOTAL** This Period (last page this line number only)..... 38.72

2016-10-17 00:00:00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 3

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

**Resounding Books PAC**

Full Name (Last, First, Middle Initial)

A.

**E Processing Network**

Mailing Address

**1415 N Loop West**

City

**Houston**

State

**TX**

Zip Code

**77008**

Purpose of Disbursement

**Monthly e-processing fees**

Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2016

Amount of Each Disbursement this Period

**20.48**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Ongoing operational expenses

Full Name (Last, First, Middle Initial)

B.

**Priority Payment Systems**

Mailing Address

**P.O. Box 246**

City

**Alpharetta**

State

**GA**

Zip Code

**30009-0246**

Purpose of Disbursement

**Monthly transaction fees**

Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2016

Amount of Each Disbursement this Period

**58.05**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Ongoing operational expenses

Full Name (Last, First, Middle Initial)

C.

**USPS**

Mailing Address

**619 S Main Street**

City

**DeForest**

State

**WI**

Zip Code

**53532**

Purpose of Disbursement

**Shipping**

Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

Amount of Each Disbursement this Period

**3.22**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Ongoing operational expenses

**SUBTOTAL** of Disbursements This Page (optional).....

**81.75**

**TOTAL** This Period (last page this line number only).....

20161017 03:00:00 20161017 03:00:00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 2 OF 3

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Resounding Books PAC**

Full Name (Last, First, Middle Initial)

**A.**

**USPS**

Mailing Address

**619 S Main Street**

City

**DeForest**

State

**WI**

Zip Code

**53532**

Purpose of Disbursement

**Shipping**

Candidate Name

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
**04 12 2016**

Amount of Each Disbursement this Period

**22.95**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) ▼

Ongoing operational expenses

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

**E Processing Network**

Mailing Address

**1415 N Loop West**

City

**Houston**

State

**TX**

Zip Code

**77008**

Purpose of Disbursement

**Monthly e-processing fees**

Candidate Name

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
**05 02 2016**

Amount of Each Disbursement this Period

**20.12**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) ▼

Ongoing operational expenses

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

**Priority Payment Systems**

Mailing Address

**P.O. Box 246**

City

**Alpharetta**

State

**GA**

Zip Code

**30009-0246**

Purpose of Disbursement

**Monthly Transaction Fees**

Candidate Name

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
**05 02 2016**

Amount of Each Disbursement this Period

**57.93**

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) ▼

Ongoing operational expenses

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....

**101.00**

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 3

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Resounding Books PAC**

Full Name (Last, First, Middle Initial)

A.

**E Processing Network**

Mailing Address

1415 N Loop West

City

Houston

State

TX

Zip Code

77008

Purpose of Disbursement

Monthly e-processing fees

Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2016

Amount of Each Disbursement this Period

20.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Ongoing Operational expenses

Full Name (Last, First, Middle Initial)

B.

**Priority Payment Systems**

Mailing Address

P.O. Box 246

City

Alpharetta

State

GA

Zip Code

30009-0246

Purpose of Disbursement

Monthly Transaction Fees

Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2016

Amount of Each Disbursement this Period

37.95

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Ongoing operational expenses

Full Name (Last, First, Middle Initial)

C.

**UPS Store**

Mailing Address

1213 N Sherman Avenue

City

Madison

State

WI

Zip Code

53704

Purpose of Disbursement

Post Office Box Rental

Candidate Name

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2016

Amount of Each Disbursement this Period

203.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Ongoing operational expenses

SUBTOTAL of Disbursements This Page (optional).....

260.95

TOTAL This Period (last page this line number only).....

443.70

2016-10-17 00:10:00

# SCHEDULE C (FEC Form 3X)

## LOANS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 1 OF 1

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

**Resounding Books PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)

Lombard, Kirsten E

Mailing Address

210 N Paterson St

City Madison

State WI

ZIP Code 53703

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

Book Printing

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

598.02

0.00

598.02

### TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
11 05 2014

M M / D D / Y Y Y Y  
11 04 2016

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

SUBTOTALS This Period This Page (optional).....

598.02

TOTALS This Period (last page in this line only).....

598.02

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

NOTICE TO THE DONOR: 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